



CITY OF WOODSTOCK

Peddler/Solicitor License Application

Application Instructions:

1. Please fill out the application completely.
2. Please attach a plan showing the proposed route, including streets to be included on each day, which the applicant intends to follow if soliciting from house to house or road to road.
3. Please attach proof of non-profit or 501 (c) status for the charitable organization, if applicable.
4. Please attach a copy of your picture ID.

Definitions:

Peddler means any person who goes from house to house, from place to place, or from street to street, *carrying or transporting* goods, wares, or merchandise and offering or exposing the same for sale, or making sales and deliveries to purchasers, or giving or leaving leaflets, pamphlets or other items that promote or advertise the sale of goods or the provision of services for profit.

Solicitor means any person who goes from house to house, from place to place, or from street to street, *soliciting or taking or attempting to take orders* for any goods, wares, or merchandise, including books, periodicals, magazines or personal property of any nature whatsoever for future delivery, or seeking information, money, donations or financial assistance for any purpose whatsoever, or soliciting or taking or attempting to take orders for services to be furnished or performed in the future



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Type of Business:

PEDDLER \$100/qtr.

SOLICITOR \$100/mo.

Name of applicant: _____

Date of Birth: _____ Sex: ____M ____F

Phone: _____ Email: _____

Home Address: _____

Number of years at this address: _____

Address of place of residence for the past three years if different from above: _____

Company name: _____ Company phone: _____

Federal Tax ID #: _____ GA Sales Tax #: _____

Company address: _____

Manager/supervisor's name: _____ Phone: _____

If charitable or religious organization, please give name of affiliation:

Tax exempt number: _____



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Please answer each question below:

1. Has the applicant or supervisor of this business ever been convicted of a crime, misdemeanor, or the violation of any municipal ordinance? Yes No

If yes, what was the nature of such offense and punishment assessed? _____

2. If soliciting door to door, check one: _____ Residential _____ Commercial
3. List all vehicles that will be used in this business: Make/Model/Year _____
Color of Vehicle _____ Tag number _____
Same information for a second vehicle: _____
4. Will you be delivering goods on the spot or taking orders? _____
5. Describe items to be sold. _____
6. Date you would like to begin selling: _____ through _____
7. Business conducted on _____ M _____ Tue _____ W _____ Thu _____ F _____ Sa _____ Su
Hours: _____ am/pm to _____ am/pm
8. Please list the names of the three most recent communities where you have solicited house to house, if any _____
9. Please provide name and address of employers for the past three years

Oath

I, _____ hereby certify that the statements listed on this application are true and correct to the best of my knowledge. I further authorize the City of Woodstock, Georgia to receive any criminal history record information and/or driving record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia. **I understand that I am NOT allowed to solicit where no solicitation signs are posted.** Doing so will result in a loss of my rights to solicit within the City Limits.

Signature

Date



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Affidavit Verifying Status for a City Public Benefit Application

By executing this affidavit under oath, as an applicant for the City of Woodstock, Georgia Business License or Occupation Tax Certificate, Alcohol License, Taxi Permit, or other public benefit as referenced in O.C.G.A. § 50-36-1, I am stating the following with respect to my application for the City of Woodstock, Georgia Business License or Occupational Tax Certificate, Alcohol License, Taxi Permit, or other public benefit for

[Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity]

1) _____ **I am a United States citizen**

OR

2) _____ **I am a legal permanent resident 18 years of age or older, or I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.***

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A §16-10-20.

Signature of Applicant: _____ Date: _____

Print Name: _____

SUBSCRIBED AND SWORN
BEFORE ME ON THIS

_____ DAY OF _____, 20____

Notary Public

My Commission Expires:

* _____
Alien Registration number for non-citizens

*Note: O.C.G.A. §50-36-1(e)(2) requires that aliens under the federal Immigration and Nationality Act, Title 8 U.S.C, as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien," legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below:



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Private Employer Exemption Affidavit Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit, the undersigned private employer verifies that it is exempt from compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation employs fewer than eleven employees and therefore, is not required to register with and/or utilize the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-90.

Signature of Exempt Private Employer

Printed Name of Exempt Private Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, ___, 20__ in Woodstock, Georgia.

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 20__.

My Commission Expires:
NOTARY PUBLIC



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CONSENT FORM

Please Duplicate As Needed

Purpose of Request:

- ☐ Peddler/Solicitor License
☐ Massage Therapy
License

Type Information Requested:

PHOTO ID REQUIRED WITH THIS FORM

☐ Malt Beverages/Wine/Distilled Spirits License

☐ Criminal History

I hereby authorize the City of Woodstock, Georgia to receive any criminal and/or driver's history pertaining to me which may be in the files of any state, federal or local criminal justice agency. PLEASE TYPE/PRINT

Last Name First Name Middle Name Maiden

Street Address Apartment Number

City State Zip County

Sex Race Height Weight Eyes Hair

Date of Birth Place of Birth Social Security Number

Driver's License Number State Expiration Date

Signature Date

Notary Public:

My Commission Expires: _____



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CITY OF WOODSTOCK PEDDLER – SOLICITOR - APPLICATION

FOR OFFICE USE ONLY:

Date Received: _____

☐ Requirements: Met Denied _____ Reason: _____
Community Development

☐ Requirements: Met Denied _____ Reason: _____
Records

☐ Requirements: Met Denied _____ Reason: _____
Police Department

☐ Requirements: Met Denied _____ Reason: _____
Fire Marshall

☐ Requirements: Met Denied _____ Reason: _____
Building Official

Amt. Paid \$ _____ Money Order or Check # _____ CC Auth. #: _____

Business #: _____ License #: _____